

**STATE OF MISSISSIPPI PRE-LICENSING EDUCATION COURSE FILING FORM**

Please clearly print or type information on this form.

**Provider Information**

Provider Name			FEIN # (if applicable)	
Contact Person	E-mail Address of Contact Person		Approved Course # (Ins. Dept. Use Only)	
Date Approved:				
Phone Number	Fax Number	Website Address (if applicable)		
( ) - ext.	( ) - ext.			
Mailing Address		City	State	Zip

**Course Information**

Course Title		
<b>Method of Instruction</b>		
<b>Self – Study</b> <input type="checkbox"/> Correspondence <input type="checkbox"/> On-Line Training (Self-Study) <input type="checkbox"/> Video/Audio/CD/DVD  Word Count _____  Calculation of Hours Method: <input type="checkbox"/> Method A <input type="checkbox"/> Method B	<b>Classroom</b> <input type="checkbox"/> Seminar/Workshop <input type="checkbox"/> Webinar <input type="checkbox"/> Teleconference <input type="checkbox"/> Other _____  <b>Examination Required? *</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Number of Examination Questions? *</b> _____ <b>Number of Examination Questions in Question Pool*?</b> _____  <small>* An examination is required for all Self-Study or partial Self-Study prelicensing education courses. The number of examination questions required is set forth in the Pre-licensing/Continuing Education Guidelines issued by the Commissioner (see MID website for more information).</small>	<b>Is this course partial Self-Study and partial Classroom?</b>  <input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, please check the method of instruction boxes listed under Self-Study and Classroom.  Self-Study Hours _____  Classroom Hours _____  <b>Is this Course Open to the Public?</b>  <input type="checkbox"/> Yes <input type="checkbox"/> No

**Credit Hours Requested and Course/Hours Decision**

Course Concentration	Hours Requested by Provider	Hours Approved by Mississippi Insurance Department (Ins. Dept. Use Only)	Reviewed by Education Advisory Committee Member: (Ins. Dept. Use Only)
<b>A. Topics:</b> (Please check the appropriate course concentration)			
<input type="checkbox"/> Life			
<input type="checkbox"/> Accident and Health			
<input type="checkbox"/> Combined Life, Accident and Health			
<input type="checkbox"/> Property			
<input type="checkbox"/> Casualty			
<input type="checkbox"/> Combined Property and Casualty			
<input type="checkbox"/> Personal Lines			
<input type="checkbox"/> Adjuster (Independent and/or Public)			

## INSTRUCTION SHEET

NOTE: This course may NOT be advertised or offered as approved in Mississippi until approval has been received from the Insurance Department.

### **PROVIDER filing for approval:**

- 1.) Complete all the fields in the “Provider Information” section of the Prelicensing Education Course Filing Form.
  - 2.) Complete the “Provider Approval Form”.
  - 3.) Complete the “Course Information” section.
  - 4.) Complete the “Method of Instruction” section. Please note the following:
    - Calculation of Method “A” hours: Divide total words by 180 = number of minutes to read material. Divide number of minutes by 50 = credit hours.
    - Calculation of Method “B” hours: 600-700 words = one text page. Books/materials: 1 credit = 15 pages, 20 PE credit = 225 text pages, 40 PE credit = 450 text pages. 3 screens (total of 600-700 words) = 1 text page. 45 screens = 1 credit hour.
- Applications including both self-study and classroom must list hours separately.
- 5.) If applicable:

Calculating exam question pool for Partial Self-Study hours: 4 hrs = 20 question exam (30 question pool), 5-8 hrs = 40 question exam (60 question pool), 9-16 hrs = 60 question exam (90 question pool), and 17-24 hrs = 75 question exam (112 question pool).

Calculating exam question pool for Entirely Self-Study hours: 4 hrs = 35 questions exam (52 question pool), 5-8 hrs = 70 question exam (105 question pool), 9-16 hrs = 100 question exam (150 question pool), 17-24 hrs = 125 question exam (187 question pool), 24+ hrs = 200 question exam (300 question pool).
  - 6.) Submit the application form along with required course materials, detailed course outline (a sample outline is contained in the PE/CE guideline), complete set of exam questions, if required and the \$50.00 course application fee.
  - 7.) In the “Credit Hours Requested and Course/Hours Decision” section, complete the “Hrs Requested by Provider” columns, detailing in the respective columns the number of hours for course concentration.

When using this application, only whole numbers of credit hours will be approved – partial hours will be eliminated.

Mail this form to Mississippi Insurance Department, P.O. Box 79, Jackson MS 39205-0079 or 501 N. West Street, Suite 1001, Woolfolk State Office Bldg, Jackson, MS 39201. For questions call 601-359-3582 or email [licensing@mid.state.ms.us](mailto:licensing@mid.state.ms.us).

Rev. 11-2009